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## BIB DATA SHEET

CONFIRMATION NO. 5754

<b>SERIAL NUMBER</b> 10/726,618	<b>FILING or 371(c) DATE</b> 12/04/2003 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3695	<b>ATTORNEY DOCKET NO.</b> 52493.000310	
<b>APPLICANTS</b> Piero Patrone Bonissone, Schenectady, NY; Kareem Sherif Aggour, Niskayuna, NY; Jo Ann Hurley-Tuel, Novato, CA; Rick William Storms, San Anselmo, CA;					
<b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/02/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/IRENE S KANG/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWINGS</b> 7	<b>TOTAL CLAIMS</b> 18  <b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> HUNTON & WILLIAMS LLP INTELLECTUAL PROPERTY DEPARTMENT 1900 K STREET, N.W. SUITE 1200 WASHINGTON, DC 20006-1109 UNITED STATES					
<b>TITLE</b> System and method for using medication and medical condition information in automated insurance underwriting					
<b>FILING FEE RECEIVED</b> 942	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		